

DIRECTOR'S MONTHLY STUDENT MEMBERSHIP/ATTENDANCE REPORT

District Name _____ District No. |____|____|____| Date _____ Report Period _____

Prepared By _____ Phone () _____ - _____ Date Beginning ____/____/____ Date Ending ____/____/____ No. of Days in Session _____

Grade	Net Enrollment to Date			End of Month Membership	Average Daily Attendance	Average Daily Membership
	Male	Female	TOTAL			
K						
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
K-12						
N*						
TOTAL K-12, N						

*Grade 'N' = Special Education children in Comprehensive Development Classes - Options 7, 8, and 9.

SEND TO: Membership/Attendance Report, Research & Information Services, 6th Floor, Andrew Johnson Tower, 710 James Robertson Parkway, Nashville, TN 37243-0381 DUE DATE: See Instructions	ED-1861 (rev 5/02)
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